

Record copy  
PCT

REQUEST

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

For recipient Office use only

International Application No. **PCT/GB 92 / 02354**

International Filing Date **16 DEC 1992**  
**16.12.92**

**United Kingdom Patent Office**  
**PCT International Application**  
Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) **MBUS 1129**

\* the title has been changed  
to "XPR"

Box No. I TITLE OF INVENTION

**[IMPROVEMENTS IN CHEMICAL COMPOUNDS] \***

Box No. II APPLICANT

Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country.)

**JOHNSON MATTHEY PUBLIC LIMITED COMPANY**  
**78 HATTON GARDEN**  
**LONDON**  
**EC1N 8JP**

**UK GB**

☐ This person is also inventor.

Telephone No.

Facsimile No.

Teleprinter No.

State (i.e. country) of nationality:

**UK GB**

State (i.e. country) of residence:

**UK GB**

This person is applicant for the purposes of:

☐ all designated States

☒ all designated States except the United States of America

☐ the United States of America only

☐ the States indicated in the Supplemental Box

Box No. III FURTHER APPLICANTS AND/OR (FURTHER) INVENTORS

Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country.)

**BRIDGER Gary James**  
**302 EAST MARSHALL STREET**  
**WEST CHESTER**  
**PENNSYLVANIA 19380**  
**USA**

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:

**UK GB**

State (i.e. country) of residence:

**US**

This person is applicant for the purposes of:

☐ all designated States

☐ all designated States except the United States of America

☒ the United States of America only

☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name: for a legal entity, full official designation. The address must include postal code and name of country.)

**PADMANABHAN Sreenivasan**  
**103 ROBIN ROAD**  
**EXTON**  
**PA 19341**  
**USA**

This person is:

☐ applicant only

☒ applicant and inventor

☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:

**US**

State (i.e. country) of residence:

**US**

This person is applicant for the purposes of:

☐ all designated States

☐ all designated States except the United States of America

☒ the United States of America only

☐ the States indicated in the Supplemental Box

☒ Further applicants and/or (further) inventors are indicated on a continuation sheet.

Deleted  
R/GS  
Added  
R/GS

## Continuation of Box No. III FURTHER APPLICANTS AND/OR (FURTHER) INVENTORS

If none of the following sub-boxes is used, this sheet is not to be included in the request.

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

SKERLJ Renato Tony  
300 E EVANS STREET  
NO P 156  
WEST CHESTER  
PA 19380  
USA

This person is:

- ☐ applicant only  
☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:

NEW ZEALAND

State (i.e. country) of residence:

US

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

THORNTON David Michael  
1 WATERSFIELD CLOSE  
LOWER EARLEY  
READING  
BERKSHIRE RG6 4DF  
UK GB

This person is:

- ☐ applicant only  
☒ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:

UK GB

State (i.e. country) of residence:

UK GB

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

This person is:

- ☐ applicant only  
☐ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:

State (i.e. country) of residence:

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

This person is:

- ☐ applicant only  
☐ applicant and inventor  
☐ inventor only (If this check-box is marked, do not fill in below.)

State (i.e. country) of nationality:

State (i.e. country) of residence:

This person is applicant for the purposes of:

- ☐ all designated States ☐ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the Supplemental Box

☐ Further applicants and/or (further) inventors are indicated on another continuation sheet.

**I No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

☒ agent☒ common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

WISHART Ian Carmichael  
JOHNSON MATTHEY PLC  
TECHNOLOGY CENTRE  
BLOUNTS COURT  
SONNING COMMON  
READING RG4 9NH

BERKSHIRE

☒ UK ☒ GB

Telephone No.

0734 722811

Facsimile No.

0734 723322

Teleprinter No.

☐ Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

**Box No.V DESIGNATION OF STATES**

The following designations are hereby made under Rule 4.9(a) (mark the applicable check-boxes; at least one must be marked):

**Regional Patent**

☒ **EP European Patent:** AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, DE Germany, DK Denmark, ES Spain, FR France, GB United Kingdom, GR Greece, IT Italy, LU Luxembourg, MC Monaco, NL Netherlands, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT

☐ **OA OAPI Patent:** Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Congo, Côte d'Ivoire, Gabon, Guinea, Mali, Mauritania, Senegal, Togo, and any other State which is a member State of OAPI and a Contracting State of the PCT (if other kind of protection or treatment desired, specify on dotted line)

**National Patent** (if other kind of protection or treatment desired, specify on dotted line):

☐ AT Austria☒ AU Australia☐ BB Barbados☐ BG Bulgaria☐ BR Brazil☒ CA Canada☐ CH and LI Switzerland and Liechtenstein☒ CS Czechoslovakia☐ DE Germany☐ DK Denmark☐ ES Spain☒ FI Finland☐ GB United Kingdom☒ HU Hungary☒ JP Japan☐ KP Democratic People's Republic of Korea☒ KR Republic of Korea☐ LK Sri Lanka☐ LU Luxembourg☐ MG Madagascar☐ MN Mongolia☐ MW Malawi☐ NL Netherlands☒ NO Norway☒ PL Poland☐ RO Romania☒ RU Russian Federation☐ SD Sudan☐ SE Sweden☒ US United States of America☒ NEW ZEALAND

Check-boxes reserved for designating States (for the purposes of a national patent) which have become party to the PCT after issuance of this sheet:

☒ NEW ZEALAND

In addition to the designations made above, the applicant also makes under Rule 4.9(b) all designations which would be permitted under the PCT except the designation(s) of \_\_\_\_\_

The applicant declares that those additional designations are subject to confirmation and that any designation which is not confirmed before the expiration of 15 months from the priority date is to be regarded as withdrawn by the applicant at the expiration of that time limit. (Confirmation of a designation consists of the filing of a notice specifying that designation and the payment of the designation and confirmation fees. Confirmation must reach the receiving Office within the 15-month time limit.)

## Box No. VI PRIORITY CLAIM

Further priority claims are indicated in the Supplemental Box ☐

The priority of the following earlier application(s) is hereby claimed:

Country (in which, or for which, the application was filed)	Filing Date (day/month/year)	Application No.	Office of filing (only for regional or international application)
(1) GB	16 DECEMBER 1991 16 12 1991	[GB] 91/26677.5	
(2)			
(3)			

Mark the following check-box if the certified copy of the earlier application is to be issued by the Office which for the purposes of the present international application is the receiving Office (a fee may be required):

☐ The receiving Office is hereby requested to transmit to the International Bureau a certified copy of the earlier application(s) identified above at item(s): \_\_\_\_\_

## Box No. VII EARLIER SEARCH

Fill in where a search (international, international-type or other) by the International Searching Authority has already been carried out or requested and the Authority is now requested to base the international search, to the extent possible, on the results of that earlier search. Identify such search or request either by reference to the relevant application (or the translation thereof) or by reference to the search request:

Country (or regional Office):

Date (day/month/year):

Number:

## Box No. VIII CHECK LIST

This international application contains the following number of sheets:

1. request : 4 sheets  
 2. description : 52 sheets  
 3. claims : 10 sheets  
 4. abstract : 1 sheets  
 5. drawings : - sheets

Total : 67 sheets

This international application is accompanied by the item(s) marked below:

1. ☐ separate signed power of attorney  
 2. ☐ copy of general power of attorney  
 3. ☐ statement explaining lack of signature  
 4. ☒ priority document(s) (specify):  
 5. ☒ fee calculation sheet  
 6. ☐ separate indications concerning deposited microorganisms  
 7. ☐ nucleotide and/or amino acid sequence listing  
 8. ☐ other (specify):

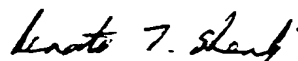
Figure No. \_\_\_\_\_ of the drawings (if any) should accompany the abstract when it is published.

## Box No. IX SIGNATURE OF APPLICANT OR AGENT

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).

 Gary James BRIDGER

JOHNSON MATTHEY PLC  
 by I C WISHART  
 duly authorised

  
 Renato Tony SKERLJ

  
 Sreenivasan PADMANABHAN

  
 David Michael THORNTON

For receiving Office use only

1. Date of actual receipt of the purported international application:	16 December 1992	2. Drawings:
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:	16 12 92	<input type="checkbox"/> received:
4. Date of timely receipt of the required corrections under PCT Article 11(2):		<input type="checkbox"/> not received:
5. International Searching Authority specified by the applicant: ISA /	6. <input type="checkbox"/> Transmittal of search copy delayed until search fee is paid	

For International Bureau use only

Date of receipt of the record copy by the International Bureau:

08 JANUARY 1993

(08.01.93)